

 <b>Citation for Non-Compliance</b> <b>Utah Minerals Regulatory Program</b> 1594 West North Temple, Salt Lake City, UT 84114 Phone: (801) 538-5340 Fax: (801) 359-3940	<b>Citation #:</b> MC-2016-42-01	
	<b>Permit Number:</b> S/015/0052	
	<b>Date Issued:</b> 02/16/2016	
<input type="checkbox"/> <b>NOTICE OF VIOLATION</b>	<input checked="" type="checkbox"/> <b>CESSATION ORDER (CO)</b>	<input type="checkbox"/> <b>FAILURE TO ABATE CO</b>
<b>Permittee Name:</b> Shain Stoddard		<b>Inspector ID and Number:</b> Wayne Western 42
<b>Mine Name:</b> CO-OP Placer Project		<b>Date of Inspection:</b> February 10, 2016
<b>Certified Return Receipt Number:</b> 7014 2870 0001 4231 9555		<b>Date and Time of Service:</b> 2-12-16 3:30
<b>Nature of condition, practice, or violation:</b> Failure to furnish and maintain reclamation surety. Failure to have a Reclamation Contract (Form MR-RC) with matches the Operator listed in the NOI and surety.		
<b>Provisions of Act, regulations, or permit violated:</b> R647-3-111-1.11. R647-3-4.		
For Cessation Orders and Failure to Abate CO's, check appropriate box(es) below:		
<input type="checkbox"/> <b>This order requires Cessation of ALL mining activities.</b> Or <input checked="" type="checkbox"/> <b>This order requires Cessation of PORTION(S) of the mining activities.</b>		
<b>Mining activities to be ceased immediately:</b> All mining activities will cease with the exception of reclamation.		
<input type="checkbox"/> Condition, practice, or violation is creating an imminent danger to health or safety of the public.	<input type="checkbox"/> Permittee/Operator is/has been conducting mining activities without a Permit.	
<input checked="" type="checkbox"/> Condition, practice, or violation is causing or can reasonably be expected to cause significant, imminent environmental harm to land, air, or water resources.	<input type="checkbox"/> Permittee has failed to abate Violation included in Citation # _____ within time for abatement originally fixed or subsequently extended.	
<b>Abatement/corrective action(s) required (for all Citations):</b>		<b>Abatement Times (if applicable)</b>
Bond needs to be in the name of the Operator, Shain Stoddard, and the bond needs to be a minimum of \$9,600.00 The Reclamation Contract needs to be in the name of the Operator, Shain Stoddard.		April 29, 2016
Permittee Representative (Print) _____ Permittee Representative's Signature _____ Date _____		Wayne H Western DOGM Representative (Print) _____ Wayne H Western 2/11/2016 DOGM Representative's Signature _____ Date _____
<b>SEE REVERSE SIDE Of This Form For Instructions And Additional Information</b>		